

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | SO | 71058 | 3/13/00 |
| O.I.P.E. CLASSIFIER | | | 3/13/00 |
| FORMALITY REVIEW | | 60500 | 3/13/00 |
| RESPONSE FORMALITY REVIEW | | | 3/13/00 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | ✓ | ✓ |
| 2 | ✓ | ✓ | ✓ |
| 3 | ✓ | ✓ | ✓ |
| 4 | ✓ | ✓ | ✓ |
| 5 | ✓ | ✓ | ✓ |
| 6 | ✓ | ✓ | ✓ |
| 7 | ✓ | ✓ | ✓ |
| 8 | ✓ | ✓ | ✓ |
| 9 | ✓ | ✓ | ✓ |
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| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 51 | ✓ | ✓ | ✓ |
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| Claim | Final | Original | Date |
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| 144 | ✓ | ✓ | ✓ |
| 145 | ✓ | ✓ | ✓ |
| 146 | ✓ | ✓ | ✓ |
| 147 | ✓ | ✓ | ✓ |
| 148 | ✓ | ✓ | ✓ |
| 149 | ✓ | ✓ | ✓ |
| 150 | ✓ | ✓ | ✓ |

Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)